

JCS997 U.S. PTO
10/03/01

05-01-01

Please type a plus sign (+) inside this box → Approved for use through 10/31/2002. OMB 0651-0032
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL	
(Only for new nonprovisional applications under 37 CFR 1.53(b))	
APPLICATION ELEMENTS	
See MPEP chapter 600 concerning utility patent application contents.	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages <u>7</u>] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>2</u>]</p> <p>5. Oath or Declaration [Total Pages <u>2</u>] a. <input checked="" type="checkbox"/> Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 17 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	
<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>	
ACCOMPANYING APPLICATION PARTS	
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) <input type="checkbox"/> Attorney</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Other:</p>	

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No.: _____

Prior application information:

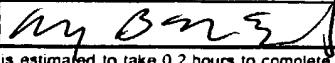
Examiner _____

Group / Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label		[Redacted] <small>Please print Customer No. or attach bar code label here.</small>			
or <input checked="" type="checkbox"/> Correspondence address below					
Name	Michael B. McNeil				
Address	Liell & McNeil Attorneys PC P.O. Box 2417				
City	Bloomington	State	IN	Zip Code	47402
Country	USA	Telephone	812-333-5355	Fax	812-333-3173

Name (Print/Type)	Michael B. McNeil	Registration No. (Attorney/Agent)	35,949
Signature			Date 4-27-01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

JC997 U.S. PTO
09/845643

04/30/01

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 355.00)

Complete if Known

Application Number	
Filing Date	
First Named Inventor	Rao
Examiner Name	
Group Art Unit	
Attorney Docket No.	Rao - utility

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **500226**
Deposit Account Name _____

Charge Any Additional Fee Required
Under 37 CFR 1.18 and 1.17

Applicant claims small entity status.
See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee (\$)		
101	710	201	355	Utility filing fee	355
108	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)		(\$ 355.00)			

2. EXTRA CLAIM FEES

Total Claims	12	Extra Claims	Fee from below	Fee Paid
Independent Claims	3	-20** =	<input type="text"/>	<input type="text"/>
Multiple Dependent		+ 3** =	<input type="text"/>	<input type="text"/>
			<input type="text"/>	<input type="text"/>

Large Entity Small Entity

Fee Code (\$)	Fee (\$)	Fee Description
103	18	203 9 Claims in excess of 20
102	80	202 40 Independent claims in excess of 3
104	270	204 135 Multiple dependent claim, if not paid
109	80	209 40 ** Reissue independent claims over original patent
110	18	210 9 ** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$ 0)

** or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee (\$)
105	130	205 65 Surcharge - late filing fee or oath	
127	50	227 25 Surcharge - late provisional filing fee or cover sheet	
139	130	139 130 Non-English specification	
147	2,520	147 2,520 For filing a request for ex parte reexamination	
112	920*	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
115	110	215 55 Extension for reply within first month	
116	390	216 195 Extension for reply within second month	
117	890	217 445 Extension for reply within third month	
118	1,390	218 695 Extension for reply within fourth month	
128	1,890	228 945 Extension for reply within fifth month	
119	310	219 155 Notice of Appeal	
120	310	220 155 Filing a brief in support of an appeal	
121	270	221 135 Request for oral hearing	
138	1,510	138 1,510 Petition to institute a public use proceeding	
140	110	240 55 Petition to revive - unavoidable	
141	1,240	241 620 Petition to revive - unintentional	
142	1,240	242 620 Utility issue fee (or reissue)	
143	440	243 220 Design issue fee	
144	600	244 300 Plant issue fee	
122	130	122 130 Petitions to the Commissioner	
123	50	123 50 Petitions related to provisional applications	
126	240	126 240 Submission of Information Disclosure Stmt	
581	40	581 40 Recording each patent assignment per property (times number of properties)	
146	710	246 355 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249 355 For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279 355 Request for Continued Examination (RCE)	
169	900	169 900 Request for expedited examination of a design application	
Other fee (specify) _____			

Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$ 0)**

SUBMITTED BY

Name (Print/Type)	Michael B. McNeil	Registration No. (Attorney/Agent)	35,949	Telephone	812-333-5355
Signature	<i>m. B. McNeil</i>				
		Date	4-27-01		

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